

## **PCA UPDATE**

### **PEDIATRIC NEUROSURGICAL PROCEDURES**

January, 1998

The Board's Patient Care Assessment (PCA) Committee recently reviewed an unfortunate incident involving a one month old infant who died during a neurosurgical procedure at a general hospital. The infant developed uncontrollable bleeding during a procedure to resect a cranial lesion. The involved surgeon was Board Certified in neurosurgery, but did not routinely perform neurosurgical procedures on infants and very young children. Problems identified in the case included the radiologist's and neurologist's failure to identify correctly the type of lesion requiring resection, the neurosurgeon's failure to anticipate the surgical risk of bleeding associated with resection of the lesion, and the neurosurgeon's failure to take adequate measures to control bleeding once it occurred. The child might well not have died had he been referred for diagnosis and treatment to a hospital with wide experience and expertise in pediatric neurosurgery.

We believe, and our neurosurgical consultants agree, that infants and very young children who require major or "non-routine" neurosurgical procedures would benefit from a referral to a tertiary care center that has experience and expertise in pediatric neurosurgery. Such a center could offer services not readily available at other hospitals, including the following: radiology staff experienced in diagnosing neurosurgical conditions in infants and very young children; specialized neurosurgeons who routinely perform neurosurgical procedures on infants and very young children; anesthesia staff experienced in handling major complications that might arise during pediatric neurosurgical procedures; and intensive care units staffed and equipped to handle post-operative complications that are distinct to the pediatric population.

Please review your hospital's capabilities for managing the neurosurgical care of infants and very young children. We recommend that if such a child presents with a condition that may require a major or "non-routine" neurosurgical procedure, you consider referring that child for diagnosis and treatment to a hospital with wide experience and expertise in pediatric neurosurgery.

We ask that you share this letter with the appropriate individuals at your hospital and hope that you will consider our recommendation for pediatric neurosurgical referrals. If you have any questions, please contact the Board's PCA Division staff.

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#### **Members of the PCA Committee**

Arnold S. Relman, M.D., Chairman    Nishan J. Kechejian, M.D.  
Peter N. Madras, M.D.    Hart Achenbach, M.D., Volunteer Consultant